

**IOWA STATE UNIVERSITY
TRAVEL ADVANCE / U-BILL AUTHORIZATION**

In consideration of receiving a travel advance to facilitate my travel, I agree to provide an accurate accounting, together with appropriate documentation, for the travel advance funds within 30 working days after completion of the travel through an Expense Report. By signing this form, I authorize Iowa State University to charge the amount of the travel advance to my U-Bill if an accurate accounting is not provided by me within the stipulated time in accordance with ISU policies and procedures.

No travel advance will be approved if this form is not signed and attached to the corresponding Spend Authorization.

I understand that this charge will be put on my U-Bill and is subject to finance charges if past due.

Signature of Traveler

Worktag(s) Funding Advance

Date